(Official Form 1) (2) 05-27477 Doc 1 Filed 07/12/05 Entered 07/12/05 09:56:28 Desc Main FORM B1 United States Bank proptrye four Page 1 of 7 Voluntary Petitic Northern District of Illinois				
Name of Debtor (if individual, enter Last, First, Middle): Turner, Dwayne E.	Name of Joint Debtor (Spouse) (Last, First,	Middle):		
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):		
Last four digits of Soc. Sec. No. / Complete EIN or other Tax I.D. No. (if more than one, state all): xxx-xx-6599	(if more than one, state all):	Last four digits of Soc. Sec. No. / Complete EIN or other Tax I.D. No. (if more than one, state all):		
Street Address of Debtor (No. & Street, City, State & Zip Code): 649 W. 80th Street Chicago, IL 60620	Street Address of Joint Debtor (No. & Street	, City, State & Zip Code):		
County of Residence or of the Principal Place of Business:	County of Residence or of the Principal Place of Business:			
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different	nt from street address):		
 Venue (Check any applicable box) ■ Debtor has been domiciled or has had a residence, principal plac preceding the date of this petition or for a longer part of such 18 	0 days than in any other District.			
There is a bankruptcy case concerning debtor's affiliate, general				
Type of Debtor (Check all boxes that apply) ☐ Individual(s) ☐ Railroad ☐ Corporation ☐ Stockbroker ☐ Partnership ☐ Commodity Broker ☐ Other ☐ Clearing Bank	Chapter or Section of Bankruptcy Code Under Which the Petition is Filed (Check one box) Chapter 7 ☐ Chapter 11 ☐ Chapter 13 ☐ Chapter 9 ☐ Chapter 12 ☐ Sec. 304 - Case ancillary to foreign proceeding			
Nature of Debts (Check one box) ☐ Consumer/Non-Business ☐ Business	Filing Fee (Check of Full Filing Fee attached) Filing Fee to be paid in installments (A	pplicable to individuals only		
Chapter 11 Small Business (Check all boxes that apply) ☐ Debtor is a small business as defined in 11 U.S.C. § 101 ☐ Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)	Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installment Rule 1006(b). See Official Form No. 3. *** Melvin J. Kaplan 1399446 ***			
Statistical/Administrative Information (Estimates only) ☐ Debtor estimates that funds will be available for distribution to u ☐ Debtor estimates that, after any exempt property is excluded and will be no funds available for distribution to unsecured creditors.	nsecured creditors. administrative expenses paid, there	IS SPACE IS FOR COURT USE ONI		
Estimated Number of Creditors 1-15 16-49 50-99 100-				
a 50 (0 \$30,001 to \$100,001 to \$000,001 to	000,001 to \$50,000,001 to More than million \$100 million			
\$0.00 \$50,001.0 \$100,001.0 \$	000,001 to \$50,000,001 to More than million \$100 million \$100 million			

Official Form 1) (12/03)	Name of Debtor(s):	FORM B1, Page 2		
Voluntary Resision 5-27477 Doc 1 This page must be completed and filed in every case) Document	TERMS 1 Decidios. TERMS 1 Page 2 of 7			
Prior Bankruptcy Case Filed Within Last 6	Years (If more than one, attach addition	onal sheet)		
Location Where Filed: Northern District Eastern Division	Case Number: 00-10103	Date Filed: 4/04/00		
Pending Bankruptcy Case Filed by any Spouse, Partner, or		one, attach additional sheet)		
Name of Debtor: None -	Case Number:	Date Filed:		
District:	Relationship:	Judge:		
Signatures				
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with the chapter of title 11, United States	Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) Exhibit A is attached and made a part of this petition. Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.			
X Drum E June Signature of Deptor Dwayne E. Turner				
X	X Character for Dataset			
Signature of Joint Debtor	Signature of Attorney for Debtor(s) Melvin J. Kaplan 1399446			
(773) 487-4373	Ex	hibit		
Telephone Number XHYKK XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Does the debtor own or have possession of any property that poses a threat of imminent and identifiable harm to public health or safety?			
Date Signature of Attorney	☐ Yes, and Exhibit C is attache ☐ No	d and made a part of this petition.		
Signature of Attorney for Debtor(s) Melvin J. Kaplan 1399446 Printed Name of Attorney for Debtor(s) Melvin J. Kaplan & Associates P.C.	Signature of Non-Attorney Petition Preparer I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.			
Firm Name 14 E. Jackson Blvd.	Printed Name of Bankruptcy Petition Preparer			
Suite 1200 Chicago, IL 60604 Address Email: www.financialrelief.com	Social Security Number (Requ	ired by 11 U.S.C.\$ 110(c).)		
(312)294-8989 Fax: (312)294-8995 Telephone Number	Address			
Date	Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:			
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. X Signature of Authorized Individual Printed Name of Authorized Individual Title of Authorized Individual	Signature of Bankruptcy Petiti Date A bankruptcy petition prepare provisions of title 11 and the I	r's failure to comply with the Federal Rules of Bankruptcy		
Date	Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.			
Date				

ACL Inc. P.O. Box 27901 Milwaukee, WI 53227

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Advocate Health Center c/o Malcolm S. Gerald & Associates 332 S. Michigan, Suite 519 Chicago, IL 60604

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Advocate Health Center 21014 Network Place Chicago, IL 60673

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Advocate Health Center 21014 Network Place Chicago, IL 60673

Chicago Central Emergency c/o United Collection Bureau P.O. Box 140190 Toledo, OH 43614

Christopher Mitchell c/o Law Office of Topper & Weiss 19 S. LaSalle Street, Suite 503 Chicago, IL 60603

Citibank-Seconds c/o NCO Financial System P.O. Box 41625

ComEd - Attn: Bankruptcy 2100 Swift Drive Oak Brook, IL 60523

Endodontiz, Periodontic Ass. c/o Feingold & Levy 10 S. LaSalle Chicago, IL 60603

Keyboard Acceptance Corp. 460 W. parkway Drive Mason, OH 45040

Lincoln Park Anesthesia c/o Medical Business Bureau P.O. Box 1219 Park Ridge, IL 60068

MCI P.O. Box 17890 Denver, CO 80217-0890

Pathology CHP Inc. c/o Medical Business Bureau P.O. Box 1219 Park Ridge, IL 60068

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Peoples Gas 130 E. Randolph Drive, 14th Fl. Chicago, IL 60601

SBC Ameritech c/o Debt Credit 557-A East Tallmadge Ave. Akron, OH 44310

SC 900 N. Delaware

SC 900 N. Delaware

SC 900 N. Delaware

University of Chicago Hospital c/o Jearey L. Rosen & Assoc. 541 Otis Bowen Drive Munster, IN 46321

University of Chicago Hospital c/o Trustmark 541 Otis Bowen Munster, IN 46321

University of Chicago Hospital P.O. Box 70565 Chicago, IL 60673

University of Chicago Hospital P.O. Box 70565 Chicago, IL 60673

University of Chicago Hospital c/o Jearey L. Rosen & Assoc. 541 Otis Bowen Drive Munster, IN 46321

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University of Chicago Hospital c/o Trustmark 541 Otis Bowen Munster, IN 46321

University of Chicago Physicians c/o ICS P.O. Box 646 Oak Lawn, IL 60454

University of Illinois Hospital

Village of Dolton 14014 Park Ave. Dolton, IL 60419

Case 05-2747/TED STATES BANKRUPTCY COURT Entered 07/12/05 09:56:28 Desc Main

NOTICE TO INDIVIDUAL CONSUMER DEBTOR

The purpose of this notice is to acquaint you with the four chapters of the federal Bankruptcy Code under which you may file a bankruptcy petition. The bankruptcy law is complicated and not easily described. Therefore, you should seek the advice of an attorney to learn of your rights and responsibilities under the law should you decide to file a petition with the court. Court employees are prohibited from giving you legal advice.

Chapter 7: Liquidation (\$155 filing fee plus \$39 administrative fee plus \$15 trustee surcharge)

Chapter Vis designed for debtors in financial difficulty who do not have the ability to pay their existing debts.

Under chapter 7 a trustee takes possession of all tour property. You may claim certain of your property as exempt under governing law. The trustee then liquidates the property and uses the proceeds to pay your creditors according to priorities of the Bankruptcy Code.

The purpose of filing a Chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, your discharge may be denied by the court, and the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a discharge, there are some debts that are not discharged under the law. Therefore, you may still be responsible for such debts as certain taxes and student loans, alimony and support payments, criminal restitution, and debts for death or personal injury caused by driving while intoxicated from alcohol or drugs.

Under certain circumstances you may keep property that you have purchased subject to valid security interest. Your attorney can explain the options that are available to you.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$155 filing fee plus \$39 administrative fee)

Chapter 13 is designed for individuals with regular income who are temporarily unable to pay their debts but would like to pay them in installments over a period of time. You are eligible for Chapter 13 only if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13 you must file a plan with the court to repay your creditors all or part of the money that you owe them, using your future earnings. Usually, the period allowed by the court to repay your debts is three years, but no more than five years. Your plan must be approved by the court before it can take effect.

Under chapter 13, unlike chapter 7, you may keep all your property, both exempt and non-exempt, as long as you continue to make payments under the plan.

After completion of payments under your plan, your debts are discharged except alimony and support payments, student loans, certain debts criminal fines and restitution and debts for death or personal injury caused by driving while intoxicated from alcohol or drugs, and long term secured obligations.

Chapter 11: Reorganization (\$800 filing fee plus \$30 administrative fee)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should also be reviewed with an attorney.

attorney.		
I, the debtor, affirm that I have	e read this notices	
7-7-05 Date	Signature of Debtor	Case No. (if known)
DISTRIBUTION	DEBTOR	COURT